

# EXHIBIT H-2



## CVS Caremark® Opioid Quantity Limits Pharmacy Reference Guide

In 2018, CVS Caremark® introduced limits on opioid prescriptions based on the following guidelines which are aligned with the Centers for Disease Control and Prevention's Guidelines for Prescribing Opioids for Chronic Pain:

1. **7-Day Acute Limit:** A new prescription for an acute condition is limited to a 7-day supply for a patient with no opioid prescriptions in the prior 90 days.
2. **IR/ER Step Therapy:** Use of an IR opioid is required prior to receiving an ER opioid due to increased patient risk. Prior authorization (PA) is needed if there is no history of an IR or ER opioid in the previous 90 days.
3. **Max Quantity Limits:** Limit the quantity of opioids prescribed to 90 MME/day. Prescribers may request a PA for higher doses up to 200 MME/day.

Note: MME refers to morphine milligram equivalent.

**When max quantity limits are exceeded, the claim will reject with the following or similar message: <<75: Prior Authorization Required>>**

Pharmacists should reach out to prescribers by phone to communicate the rejection and understand whether the quantity can be reduced within limits (see below for commonly prescribed opioids) or if a PA will be requested. Confirm correct directions and dose with prescribers if reducing the quantity.

**When communicating with prescribers, refer to these common MME quantities.**

Drug / Strength	1 Month Limit	Drug / Strength	1 Month Limit
APAP/codeine tab 300/30 mg	360 tabs	Oxycodone tab 20 mg	90 tabs
Dolophine 5 mg, 10 mg	90 tabs	Oxycodone tab 30 mg	60 tabs
Duragesic 25 mcg, 37.5 mcg	10 patches	Oxycodone tab 5 mg, 10 mg	180 tabs
Duragesic ≥50 mcg	0*	Oxycodone/APAP tab 10/325 mg	180 tabs
Hydrocodone/APAP tab 5/325 mg	240 tabs	Oxycodone/APAP tab 5/325 mg	360 tabs
Hydrocodone/APAP tab 7.5/325, 10/325 mg	180 tabs	Oxycodone/APAP tab 7.5/325 mg	240 tabs
Hydrocodone/ibuprofen tab – All strengths	50 tabs	OxyContin 10 mg, 15 mg, 20 mg, 30 mg	60 tabs
Hydromorphone tab 8 mg	60 tabs	OxyContin 40 mg, 60 mg, 80 mg	0*
MS Contin 60 mg, 100 mg, 200 mg	0*	Tramadol 50 mg	180 tabs
Oxycodone tab 15 mg	120 tabs	Tramadol ER 200 mg, 300 mg	0*

\*The initial limit is zero. All requests for this drug and strength will be considered through prior authorization.